In this issue of *Occupational Medicine*

Our cover picture is ‘West Riding’s Homes of Toil’ by Fred Cecil Jones. It depicts the Yorkshire town of Brighouse seen from Healey Wood, Rastrick, and was painted c.1936. We carry it in this issue to celebrate the Society of Occupational Medicine’s Annual Scientific Meeting which this year will be held in York. The artist lived and painted in the West Riding of Yorkshire and this technically impressive and detailed picture clearly shows the dominance of industry over the landscape and its impact on public and occupational health. The artist himself is said to be the pipe-smoking individual in the centre.

The impact of the industrial revolution was seen and felt in Yorkshire as much as anywhere. In the towns of the West Riding, there was an exponential growth in the manufacture of woollen goods as new machinery became available to enable mass production. At one point in the 19th century, the region accounted for half the world’s exported woollen goods. The population of the West Riding towns exploded with huge social consequences. In 1833, at about the time Thackrah was documenting occupational disease in West Yorkshire and only 20 years after the execution of 17 Luddites for breaking machinery, the population was twice what it had been in 1800. The average age of death of some trades was as young as 20 years and the working week of children aged 9 had only just been limited to 48 h. Stone from the moors and hilltops was used to almost obliterate the narrow valley bottoms with factory buildings and workers’ housing. The textile industry went through repeated boom and bust over the next 150 years. It generated enormous wealth for a few, but poverty and ill-health for many. Most of the mill buildings Jones painted have now been demolished. The few surviving have been sand blasted and find alternative use as art galleries, luxury apartments and university residences but even without their soot serve as a reminder of our industrial past.

Elsewhere in this issue, the search for a gold standard diagnostic test in hand–arm vibration syndrome continues. Lander et al. [1] compare the Stockholm Neurological Scale with the results of current perception threshold tests and nerve conduction studies. While median and ulnar neuropathies proximal to the hand were common in workers being assessed, neither the nerve conduction results nor the current perception results had a strong association with the Stockholm Neurological Scale; exposure to vibration in total hours was the main variable associated with the scale. Godden et al. [2] report a survey of almost 3000 professional divers and while they found increased reporting of symptoms they did not find any definite health effects of occupation. They suggest that account needs to be taken of psychosocial factors in future interventions. Jolanki et al. [3] look at data from the Finnish Register of Occupational Diseases to investigate skin and respiratory diseases in metalworking machinists. While respiratory disease was unusual, they found a three-fold risk for getting an occupational skin disease compared to the total working population. Metalworking fluids were the principal cause and the authors recommend specific skin tests and inhalation challenge tests with metalworking fluids if an occupational skin or respiratory disease is suspected.

Finally, returning to Yorkshire, Jones et al. [4] follow up a previous study of mortality among male tin smelter workers. In this paper [5], they study the relationship between lung cancer mortality and quantitative measures of exposure. They conclude that a substantial proportion of the excess lung cancer mortality observed in the cohort of workers at the Capper Pass smelter can be attributed to the effects of arsenic exposure, but only if it is assumed that the resulting excess relative risk of lung cancer declines with time since exposure and attained age.

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References